

PERMIT/MAJOR PERMIT ADJUSTMENT APPLICATION

TO BE COMPLETED BY PLANNING COUNTER STAFF										
FILE NUMBER AD		RECEI	PT #							
QUAD:	ZONING:	GP:	COUNCIL DISTRICT:							
PD ZONING #		PREVIOUS PERMIT:		BY:	NT:					
	☐ RESIDENTIAL	\ co	OMMERCIAL [INDUSTR	RIAL					
TO BE COMPLETED BY APPLICANT (PLEASE PRINT OR TYPE)										
PROPERTY LOCATION/ ADDRESS:										
ASSESSOR'S PARCEL NUMBER(S)										
DESCRIPTION OF PROPOSED MINOR CHANGE (Approval is limited to description contained herein)*										
DOES THE PROJECT INVOLVE HUD FEDERAL FUNDING/ASSISTANCE? NO YES										
If yes, please indicate type of funding and submit documentation (e.g. NEPA) to Planning Staff*										
*Planning Staff: Pl	lease refer application	and documentati	on to Environmental	Team for furthe	er review.					
SIGNATURE OF PROPERTY OWNER REQUIRED										
Check One:										
I hereby certify that a Homeowner's Association/Architectural Review Committee does exist and have reviewed this project. Please include a copy of their letter and comments with the application.										
☐ I hereby certify that a Homeowner's Association does not exist to comment on the requested change to my property.										
PRINT NAME OF	PROPERTY OWNER	₹		DAYTIME TI	ELEPHONE					
ADDRESS			CITY	STATE	ZIP CODE					
REQUIRED SIGN OF PROPERTY C	ATURE DWNER (see page 2)				DATE					

Please submit this application to the Planning Permit Center, 1st floor of City Hall. The Planning Permit Center Counter hours are posted on our website at http://www.sanjoseca.gov/planning/. For assistance, call (408) 535-3555.

^{*} Proposals that include changes to existing wireless facilities or new facilities <u>require</u> a submittal of a completed Environmental Exemption form or documentation of approved Environmental Clearance for the proposed project at application appointment.

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<u>~</u> ;	TERMIT/MACCRI ERMIT ADGCCTMENT AT LICATION										
CONTACT PERSON											
PR	INT NAME/COMPANY										
ADDRESS CITY		CITY			STATE	ZIP CODE					
PHONE # EMAIL ADDR			RESS								
	Please complete the FRONT Sheet of this application and provide the following. INCOMPLETE APPLICATION WILL NOT BE ACCEPTED.										
	FILING FEE: \$302* (over the counter review) - Checks made payable to "City of San Jose" \$75* - per additional ¼ hour \$833* for Major Adjustment \$302* - per additional hour *includes Citywide Planning fee			 STORMWATER CONTROL PLAN. A Stormwater Control Plan is required for all projects creating, replacing or expanding impervious surface by 10,000 square feet or more. a. Complete the Pervious & Impervious Surfaces Comparison Table located on page 4. b. All existing natural hydrologic features (depressions, names of watercourses, etc.) and significant natural resources. c. Specify soil type(s). d. Specify depth to groundwater. e. 100-year flood elevation. f. All existing and proposed topographic contours with drainage areas and sub areas delineated and arrows showing flow direction. g. Separate drainage areas depending on complexity of drainage network. h. For each drainage areas, specify types of impervious area (roof, plaza, sidewalk, streets, parking, etc) and area of each. i. Show location, size, and identification (including description), of Source Control Measures (SCMs) 							
	PROPERTY OWNER SIGNATURE. Can be submitted as original wet signature, faxed copy signature or electronic signature or only the property owner or representative who has Power of Attorney(POA) can sign this application. A copy of the POA must be submitted with this application.										
	ASSESSOR'S PARCEL MAP marked with the project location.										
	PHOTOGRAPHS of existing building or subject area.										
Four (4) Copies of the development plans. An additional plan set is required if stormwater is required. The development plan should include:											
	property andb. A DRAWING TO SCALE of the proposed (elevations, floor plans, construction, deta	ion of the proposed changes on the subject erty and RAWING TO SCALE of the proposed change ations, floor plans, construction, details, as opriate). A Site Plan should contain the following		and (TC infili j. Det con k. Loc	and Water Quality Treatment Control Measures (TCMs) such as swales, detention basins, infiltration trenches, etc. Details of all proposed water quality treatment control measures. Location, size and identification of proposed landscaping/plant material.						
	 Dimensions of subject property, lot lir existing and proposed driveways Streets adjoining the subject prop Existing and proposed buildings a structures, including proposed buildings and proposed off-street ploading, landscape and circulation Existing trees to be removed. Incoincumference of tree at 2 feet about the proposed buildings and proposed off-street ploading, landscape and circulation 	erty nd Iding sed arking, a areas. lude ove ground		Plai	n and Landscap oplemental Repo Calculations il treatment con standards set Urban Runoff Name and loc Identify polluta areas, includia areas, refuse storage, vehice	pe Plan.					

proposed structures and/or trees on the site.

Additional Requirements: 4. Water quality Treatment Control Measure maintenance requirements. 5. Licensed certification that the specified Treatment Control Measures meet the requirements in Post-Construction Urban Runoff Management Policy No. 6-29. An additional Public Works C.3 fee of \$186 per hour will be charged for the review of any Stormwater Control Plans. a Stormwater Hydromodification Management (HM) Plan/Report: A Stormwater HM Plan/Report